

State of Rhode Island Department of Business Regulation



Division of Banking
1511 Pontiac Avenue, Bldg. 69-2, Cranston, Rhode Island 02920
Telephone: (401) 462-9503, Facsimile: (401) 462-9559
e-mail address: bankinquiry@dbr.state.ri.us

UNIFORM LICENSE FORMS STATE SPECIFIC REQUIREMENTS

Form MU2 – Uniform Lender/Loan Brokerl/Small Loan Lender Biographical Statement & Consent Form

Form(s) MU2 must accompany Form MU1, the Uniform Mortgage Lender/Mortgage Broker form and the SLLU1, the Uniform Small Loan Lender form. Each individual identified as a *control person* for the application on Schedule A of Form MU1or Form SLLU1, must complete Form MU2 as well as any person designated as the manager of a licensed office or a licensed branch office.

- 1. **FEE** No fee is required for Form MU2.
- 2. **FINANCIAL RESPONSIBILITY** -. Each *control person* shall provide a financial statement, **signed by the respective** *control person* which is dated **not more than sixty (60) days** prior to the application date, showing assets and liabilities and positive net worth. The financial statement must be prepared in accordance with generally accepted accounting principles and will be treated as confidential information that is not open to public inspection at anytime.
- 3. MORTGAGE *CONTROL PERSON* ATTACHMENTS The following documents must be attached to the Form MU2
 - a. Two fingerprint cards issued by the federal bureau of investigation for state and national criminal history record checks.
 - b. A signed and completed authorization for background check (form provided).
 - c. Complete details of all events or proceedings for any "Yes" answer to the questions contained in Form MU2, 8, Disclosures.
- 4. **WHO TO CONTACT** Contact the Division of Banking licensing staff by phone at (401) 222-2405 or send your questions via e-mail to *bankinguiry@dbr.state.ri.us* for additional assistance.
- 5. **DELIVERY INSTRUCTIONS** Please send completed Form MU1, Form MU2, fees, and attachments to the following address:

State of Rhode Island and Providence Plantations
Department of Business Regulation
Division of Banking
1511 Pontiac Avenue, Bldg. 69-2
Cranston, Rhode Island 02920



State of Rhode Island Department of Business Regulation



Division of Banking 1511 Pontiac Avenue, Blgd. 69-2, Cranston, Rhode Island 02920 Telephone: (401) 462-9503, Facsimile: (401) 462-9559

AUTHORIZATION FOR BACKGROUND	CHECK AND RE	LEASE
Company Name		
Address		
City, State, Zip Code		
Ι,		
(Type or Print Full Name a	nd Title)	
Maiden Name or Former Name Of		
(Type or Print Residence Address, Cit	y, State, Zip Code)	
having a date of birth of and social sec voluntarily direct and authorize the <i>Division of Banking</i> of the D		hereby
above information as part of its evaluation of my general character used for purposes of obtaining a credit report on me and/or Identification of the Department of the Attorney General for the Department of Business Regulation any criminal record or o Identification has on file in reference to me.	and financial condition may be shared wit State of Rhode Islan	on. The information may be the the Bureau of Criminal and to make available to the
I hereby waive and release any and all manner of actions, cause of description, arising from any release of criminal records and requestion Rhode Island, the Bureau of Criminal Identification, the Attorney of the employees of the Attorney General's Office and the employee Regulation in both law and equity which I may now have or in the form	ests there from, wha General, the Departm es and officials of t	atsoever against the State of nent of Business Regulation,
Upon submission of an application for licensure or a change in a licensure as defined in R. I. Gen. Laws § 19-14-1(10), each such of provide a signed response to the questions (Additional copies of the	ficer, director, manag	ger or principal owner must
Attach copy of a Photo ID (i.e. Valid Drivers License or ID Care	d.	Attached:
The undersigned certifies that the above responses are true and ac	curate to the best of	my knowledge and belief.
Full Name (Type or Print)	Title	
Signature	Date	
Notary Public		Noton: Cosl
My Commission Expires		Notary Seal

UNIFORM MORTGAGE BIOGRAPHICAL STATEMENT & CONSENT FORM FORM MU2 INSTRUCTIONS

A. GENERAL INSTRUCTIONS

- 1. **FILING** Form(s) MU2 must accompany Form MU1, the Uniform Mortgage Lender/Mortgage Broker form. Each individual identified as a *control person* for the *applicant* on Schedule A of Form MU1, must complete Form MU2. An *applicant* must also refer to *jurisdiction*-specific requirements published by each *jurisdiction* in which it is applying. Some *jurisdictions* may require biographical information about people that do not fit the *control person* definition, like a branch manager. Such *jurisdictions* may therefore request a Form MU2 with other filings. Additionally, *applicants* must update the roster of *control persons* on Form MU1 by filing a Schedule C, thus requiring additional MU2 forms.
- 2. **EMPLOYMENT REPRESENTATION** The employment representation section must be completed by an authorized representative of the *applicant*.
- 3. **TERMS USED** See the following Explanation of Terms section regarding italicized words/phrases.
- 4. **DATES** The filing date is the date *applicant* submits this form to the *jurisdiction(s)*. The desired effective date is the date *applicant* would like the license/registration or amendment to become effective. Review published *jurisdiction*—specific requirements for effective date expectations.
- 5. **AMENDMENTS** The *applicant* must update biographical information as required in each *jurisdiction* by submitting amendments using Form MU2. On Form MU2, circle or otherwise identify the item being amended. Complete only items 1(A) and 1(I), as well as the information that is being amended. Review published *jurisdiction*—specific requirements concerning the return of the prior original license/registration document when submitting the amended Form MU2.

B. FILING INSTRUCTIONS

1. FORMAT

- A. Each individual identified as a *control person* on Schedules A or C must complete Form MU2. A fully completed Form MU2 for each *control person* is required to be submitted to each *jurisdiction* along with the *applicant*'s initial Form MU1. Form MU2 also accompanies Schedule C when reporting new *control person(s)*. The *applicant* should review published *jurisdiction*—specific requirements for additional specific filing requirements using Form MU2 providing biographical information about non-control persons.
- B. Type all information.
- C. Use only the current version of Form MU2 or a reproduction of it.
- D. The Acknowledgment & Consent section must include notarized original manual signature.
- E. The Mortgage Lender/Mortgage Broker Employment Representation section must include original manual signature.
- F. Employment history, item 6: provide the full legal name of the company, beginning with your current employer. For the purposes of this history, include both 1099 independent contractor assignments as well as W-2 status employment.
- 2. **ATTACHMENTS** Review published *jurisdiction*—specific instructions for required attachments including but not limited to:
 - A. Review published *jurisdiction*-specific instructions concerning attachments in PDF or alternative formats.
 - B. Two Fingerprint Cards, if required by applicable jurisdiction(s), per item 4 of Form MU2
 - C. Personal credit report, bond, or other demonstration of financial responsibility
 - D. Depending on the *jurisdiction*, individual(s) originating mortgage loans at the business may need to file a Form MU4. Review published *jurisdiction*-specific requirements for details.
 - E. Fees

C. **EXPLANATION OF TERMS** – The following terms are italicized throughout Form MU2

1. GENERAL

APPLICANT – The mortgage lender or mortgage broker applying on or amending information on Form MU1 (including schedules) or Form MU3. The only instance in which the applicant is an individual is in the case of a sole proprietorship.

CONTROL – The power, directly or indirectly, to direct the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any person that (i) is a director, general partner or executive officer; (ii) directly or indirectly has the right to vote 10% or more of a class of a voting security or has the power to sell or direct the sale of 10% or more of a class of voting securities; (iii) in the case of an LLC, Managing Member; or (iv) in the case of a partnership, has the right to receive upon dissolution, or has contributed, 10% or more of the capital, is presumed to control that company. **CONTROL PERSON** – An individual (a natural person) named on Form MU1 in Item 1A or in Schedules

A, B, or C that directly or indirectly exercises control over the applicant.

JURISDICTION – A state, the District of Columbia, the Commonwealth of Puerto Rico, any territory of the United States, or any subdivision or regulatory body thereof.

PERSON – An individual, partnership, corporation, trust, LLC, or other organization.

2. FOR THE PURPOSE OF ITEM 8

CHARGED – Being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

ENJOINED – Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction, or a temporary restraining order.

FELONY – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *felony* is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

FINANCIAL SERVICES OR FINANCIAL SERVICES-RELATED – Pertaining to securities, commodities, banking, insurance, consumer lending, or real estate (including, but not limited to; acting as or being associated with a bank or savings association, credit union, mortgage lender, mortgage broker, real estate salesperson or agent, closing agent, title company, or escrow agent).

FOREIGN FINANCIAL REGULATORY AUTHORITY - Includes (1) a financial services authority of a foreign country; (2) other governmental body empowered by a foreign government to administer or enforce its laws relating to the regulation of financial services or financial services-related activities; and (3) a foreign membership organization, a function of which is to regulate the participation of its members in financial services activities listed above.

FOUND - Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

INVOLVED – Doing an act or omission or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act or omission.

MISDEMEANOR – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a misdemeanor is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

ORDER – A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an order.

PROCEEDING – Includes a formal administrative or civil action initiated by a governmental agency, selfregulatory organization or a foreign financial regulatory authority; a felony criminal indictment or information (or equivalent formal charge); or a *misdemeanor* criminal information (or equivalent formal charge). The term does not include other civil litigation, investigations, or arrests or similar charges affected in the absence of a formal criminal indictment or information (or equivalent formal charge).

FORM MU2	BIOGRAPHICAL STATEMENT & CONSENT UNIFORM MORTGAGE LENDER/MORTGAGE BROKER FORM						
	Date of filing (MM/DD/YYYY): Desired Effective Date (MM/DD/YYYY):						
License Number information applicable) is optional		License # Jurisdiction		License #	Jurisdiction	License #	Jurisdiction
sheets if necessary.	. Coo additional	License #	Jurisdiction	License #	Jurisdiction	License #	Jurisdiction
☐ NEW APPLICATION	NC		AMEND	MENT To amend	d, circle or identi	ify items being a	mended.
1. Individual's ide	ntifying informat	tion <i>:</i>					
	t and middle nam						
Last Name		Ė	First Name		Full Middle Na	me	Suffix (if any)
	Security Number:			(C) Gender:		/lale 🗌	Female
	Birth (MM/DD/Y)			ovince of Birth:		Country of Birt	
				ed or are using, or and names used b			
Name	_	Name _		Name		Name	
(H) For amendn legal documenta		filing reports	that an individu	al's name has cha	nged, enter the i	new name and a	attach supporting
Last Name		F	First Name		Full Middle Na	ıme	Suffix (if any)
(I) Employer N	ame (Mortgage Lo	ender/Mortgag	ge Broker):				
Number & S	Street	City		State / P	Province & Coun	try Zip+4	/ Postal Code
(K) Current Res	sidence address (i	f different fror	m employment a	address):			
Number & S	Street	City		State / P	Province & Coun	try Zip+4	/ Postal Code
(L) Telephone	Numbers and e-m	ail address:					
() Business Ph	none	()	ne (optional)	() Fax Line ((ontional)		address (optional)
	knowledgment &		ne (optional)	T AX LITTE (Ορτιοπαι)	e-man a	duress (optional)
I swear or affirm that I have executed this form before a Notary Public, of my own free will and: (A) I have read and understand the items and instructions on this form; (B) My answers (including attachments) are true and complete to the best of my knowledge; (C) I understand that I am subject to administrative, civil or criminal penalties if I give false or misleading answers; (D) I authorize all my current and former <i>employers</i> , law enforcement agencies, and any other <i>person</i> to furnish to any <i>jurisdiction</i> , or any agent acting on its behalf, any information they have, including without limitation my creditworthiness, character, ability, business activities, educational background, general reputation, history of my employment and, in the case of former <i>employers</i> , complete reasons for my termination; (E) I have read and understand applicable federal and state law, and will be in compliance at all times; (F) I promise to keep the information contained in this form current and to file accurate supplementary information on a timely basis.							
		te (MM/DD/YYY	•		. •	re of individual	
	Sig	nied of atteste	ed before me: _ Pr	 int Notary Public nan	by ne Print ind	 lividual's name	
Notary seal h	ere on	this		day of,		at	
, , , , , , , , , , , , , , , , , , , ,	Dat			Month	Year	State	County
	Not	 tary Public signa	ature		Notary A	Appointment Expir	es (MM/DD/YYYY)
Individual's		Consent mus	st always be com	pleted in full with o seal where applicab	riginal, manual s		

Applicant fu	ıll legal nam	ne:		Individual'	s full lega	al name: _					
To the bes individual fully qualit completer	st of my kno will be fami fied for the ness of the on contained y Name	ployment Representation mus	person is curres, and rules of being made the this application approved this atture of authors always be	rently bonded whof the jurisdiction herein. I have to ation. I have prosinformation and norized party	n(s) with vaken approvided the disigned to full with	which this ropriate stee individua the form. Print original, r	applica eps to v I an op Name	tion is learify the portuniand	being fi e accur ty to re	led, an racy ar view th	nd
☐ I repre		Affix no ormation filing representation am submitting, have submitted,	:	or seal where a			ction(s)	two fir	ıgerprir	nt cards	s as
required.	pplying for	a mortgage individual license/re	gistration on	ly in jurisdiction	(s) that do	not requi	re me t	o subm	nit finge	rprint o	ards.
	ecessary.)		less (item in	., give all addre	5565 101 1	ine pasi it	years	. (Allal	ii auui	lionai s	oneets
From (MM/YYYY)	To (MM/YYYY)	Street Address		City		State or Province		Zip or Postal Code		Country	
empl exter	loyments, s nded travel,	istory: Provide complete employment, military service, etc. Indicate by "YES" or "NO" s as needed.)	, and homen	naking. Also inc	lude peri	ods such a	as uner	nployed	d, full-ti	me stu	
From (MM/YYYY)	To (MM/YYYY)	Employer (company name)	Posit	tion Held	C	City		e or vince	Cou	ntry	YES or NO?

Αŗ	plica	licant full legal name: Individual's full legal name:		
7	1	ner Business: Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent or otherwise? (Please exclude non-financial services-related activity that is exclusively charitable, civic, religious, or fraternal and is recognized as tax exempt.) If YES, provide the following details: the name of the other business; whether the business is financial services-related; the address of the other business; the nature of the other business; your position, title, or relationship with the other business; the start date of your relationship; the approximate number of hours per month you devote to the other business; and briefly describe your duties relating to the other business. (Attach additional sheets as needed.) Details:	YES	NO
8		Disclosures. If the anguer to any of the following is "VES" provide complete details of all events or precedings in	on ottoo	hmont
		Disclosures: If the answer to any of the following is "YES", provide complete details of all events or proceedings in a Refer to the explanation of terms section of the instructions for explanations of italicized terms.	an allac	illient.
	(4)	Financial Disclosure	YES	NO
	(A)	Within the past ten years: (1) have you filed a personal bankruptcy petition or been the subject of an involuntary bankruptcy petition?		
		(2) based upon events that occurred while you exercised control over any organization, have any filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?		
	(B)	Has a bonding company ever denied, paid out on, or revoked a bond for you?		
	(C)	Do you have any unsatisfied judgments or liens against you?		
		Criminal Disclosure		
	(D)	Have you ever: (1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any felony?		
		(2) been <i>charged</i> with any <i>felony</i> ?		
	(E)	Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever: (1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i> ?		
		(2) been charged with any felony?		
	(F)			
		(1) Have you ever been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor involving: financial services</i> or a <i>financial services-related</i> business; any fraud, false statements, or omissions; any theft or wrongful taking of property; bribery; perjury; forgery; counterfeiting; extortion; or a conspiracy to commit any of these offenses?		
		(2) Are there pending charges against you for a misdemeanor as described in 8(F)(1)?		
	(G)	Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever: (1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor</i> specified in 8(F)(1)?		
	(2) been charged with a misdemeanor specified in 8(F)(1)?			

Applicant full legal name: Individual's full legal name:						
	Regulatory Action Disclosure	YES	NO			
(H) Has any State or federal regulatory agency or foreign financial regulatory authority ever:(1) found you to have made a false statement or omission or been dishonest, unfair or unethical?						
(2) found you to have been involved in a violation of a financial services-related regulation(s) or statute(s)?						
(3) found you to have been a cause of a financial services-related business having its authorization to do business denied, suspended, revoked or restricted?						
(4) entered an order against you in co	onnection with a financial services-related activity?					
	our registration or license, disciplined you, or otherwise by <i>order</i> , prevented you services-related business or restricted your activities?					
(6) barred you from association with engaging in a <i>financial services-i</i>	an entity regulated by such commission, authority, agency, or officer, or from related business?					
(7) issued a final order based on viole deceptive conduct?	ations of any law or regulations that prohibit fraudulent, manipulative, or					
(I) Have you ever had an authorizatio revoked or suspended?	n to act as an attorney, accountant, or State or federal contractor that was					
(J) Are you now the subject of any reg 8(I)?	julatory proceeding that could result in a "yes" answer to any part of 8(H) or					
	Civil Judicial Disclosure					
(K) (1) Has any domestic or foreign (a) <i>enjoined</i> you in connection with	court ever: ith any <i>financial services-related</i> activity?					
(b) found that you were involved	in a violation of any financial services-related statute(s) or regulation(s)?					
	lement agreement, a financial services-related civil action brought against you a financial regulatory authority?					
(2) Are you named in any pending a part of 8K(1)?	financial services-related civil action that could result in a "yes" answer to any					
Custon	ner Arbitration/Civil Litigation Disclosure					
(L) Have you ever been named as a re arbitration or civil litigation which:	espondent/defendant in a financial services-related consumer-initiated					
(1) is still pending; or						
(2) resulted in an arbitration award o action; or	r civil judgment against you, regardless of amount, or that required corrective					
(3) was settled for any amount?						
Termination Disclosure						
(M) Have you ever voluntarily resigned accused you of:	l, been discharged, or permitted to resign after allegations were made that					
(1) violating statute(s), regulation(s), rule(s), or industry standards of conduct?						
(2) fraud, dishonesty, theft, or the wrongful taking of property?						